## **New Jersey Department of Environmental Protection**



## **Request for Authorization (RFA) Certification Form**

## NJPDES - Discharge to Surface Water Construction Dewatering General Permit (NJ0134511)

Mail Code: 401-02B DIVISION OF WATER QUALITY Bureau of Surface Water Permitting 401 E. State St., P.O. Box 420 Trenton, NJ 08625-0420

## Date Certification Received by the DEP:

Any applicant who requests authorization under the New Jersey Pollutant Discharge Elimination System (NJPDES) General Permit Number NJ0134511 is required to designate an authorized agent who will be responsible for ensuring that the discharge to be authorized by this general permit complies with all applicable requirements of this permit and has certified this in writing. The Department shall receive an original copy of this Certification form and the untreated groundwater analysis at least 14 days prior to commencement of discharge. A copy of this Certification form and the untreated groundwater analysis shall also be submitted to the appropriate Enforcement Office 14 days prior to discharge.

Please complete the following Certification to request authorization under the Master General Permit for Construction Dewatering Discharge(s):

1. Identify the name of Applicant/Operating Entity authorizing the work:

-	Business address:	
	Telephone Number:	
	Name of the Operating Entity's Principal Officer:	
	Title:	_
	Telephone Number:	
	Email:	
2.	Identify the name of Authorized Agent for the Operating Entity:	
	Title:	
	Affiliation:	
	Address:	
	Telephone Number:	
	Email:	

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3. —	Describe the Project:			
4.	Identify the scheduled date(s) of the proposed discharge event(s):			
5.	State the approximate duration of the discharge:			
6.	Identify the source of the water to be discharged:			
qu	List the number of well point(s) if applicable, and include the approximate total antity of water to be discharged as well as the anticipated flow rate of the scharge:			
8. —	Describe the designated discharge point:			
9. —	Identify the location(s) of the discharge (street address, municipality, and county):			
10	. Identify the name and classification of the receiving waters to which the discharge is directed, including the description of the method of transport (i.e., by hose, via storm sewer, via ditch, tributary, etc.):			

11. Describe all best n provided:	nanagement practices (BMP) to be used, inc	luding any treatment
12: Describe any turb	idity benchmark established, if applicable:	
analysis of the untre- certification form. The	st submit the analytical results of at least <b>one ated groundwater</b> from the proposed consti-  analysis shall address all of the parameters a New Jersey certified laboratory.	ruction site with this
The signature below m	nust be completed in accordance with N.J.A.	C. 7:14-4.9.
prepared under my dir assure that qualified p Based on my inquiry of persons directly respo to the best of my know there are significant pe	of law that this Certification Form and all attraction or supervision in accordance with a system of the person or persons who manage the system is for gathering the information, the information of the decay and belief, true, accurate, and complete analties for submitting false information, inclusion for purposely, knowingly, recklessly, or negligible.	ystem designed to formation submitted. stem, or those mation submitted is, ete. I am aware that uding the possibility of
	Signature of Operating Entity (Principal Officer or Specified Official)	
	Printed Name/Title	
	Date of Signature	
	Signature of Authorized Agent	
	Printed Name/Title	
	Date of Signature	

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